## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or  $\underline{\underline{\mathcal{D}}}$ ocket Number

3216.320501

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			26	26				RATE	FEE	7	RATE	FEE
FC	)R		NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	385.00	OR		770.00
TC	TAL CHARGE	ABLE CLAIMS	2 6 minus 20=		* 6			X\$ 9=		OR	X\$18=	108
INE	DEPENDENT C	LAIMS	Ų minus 3 =		* (_	*		X43=		OR	X86=	86
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	_
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	l	TOTAL	-	OR	TOTAL	964
CLAIMS AS AMENDED - PART II								-	<u>L</u>	]	OTHER	7-
	<del>,</del>	(Column 1)	- <del></del>	(Colum		(Column 3)	٠,	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- C1 A18A	=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MU	JUIPLE DEF	'ENDEN!	CLAIM			+145=		OR.	+290=	1. 1
		. L	TOTAL ADDIT, FEE			TOTAL ADDIT. FEE						
		(Column 1)	<u> </u>	(Colum	nn 2)	(Column 3)	• •	10011.1 LL				
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AIM	= .		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								÷145=		OR	+290=	
·.								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	: 
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	l	Minus	***	3: 384	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=											+290=	:
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR (	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	The Thighest Hall	ber i reviously i ale	Troi (Total of	maepenaei	111) 13 1116 1	ingriest number	ioui	id in the app	ropriate box	. 111 COIC	, , , , , , , , , , , , , , , , , , ,	